

# School Health Advisory Committee

April 11, 2002

Moreton Building, room 652

10:30 a.m. – 2:30 p.m.

---

## **Committee Members present:**

Ann Sims, M.D.  
Alma Golden, M.D.  
Cathy Harris, R.N.  
Charles "Dave" Shobe  
David Wiley, Ph.D.  
Jane Tustin, R.N., BSN  
Michael Hinojosa, Ed.D.  
Michelle Smith  
Ramón Orduño  
Ruth Stewart, MSN, R.N.  
Stephanie Benold  
Tommy Fleming, Ph.D.

## **Staff present:**

Lee Johnson  
Michelle McComb  
Mary Jackson  
Marion Stoutner  
Diane Bernal  
Shelley Bjorkman

## **Committee Members not present:**

Linda Thune  
Karen Mitchell Franks  
Jenni Jennings

## **Visitors/Stakeholders:**

Sally Griewahn, Abilene Intercollegiate School of Nursing  
Kathy King-Tryce, Texas Diabetes Program/Council  
Cathy Ghoullson, Texas Association of School Boards  
Cathy Douglass, Texas Association of School Boards  
Diane Rhodes, Texas Dental Association  
Cindy Ashby, Texas Social Workers Association  
Mark Hanna, Texas Nurse's Association  
Terrie Hairston, Board of Vocational Nurse Examiners

## **Review agenda; modified to reflect change**

- I. Dr. Sanchez unable to meet with the committee as planned for this afternoon. Rearrange agenda to compensate agenda change.

## **Review minutes from previous meetings**

- I. January 10, 2002 meeting held the American Cancer Society, Texas Division Location, approved as circulated.
- II. February 21, 2002, coalition lunch held with the Texas Board of Health, approved as circulated.
- III. Public comment – none received.

## **Roles & responsibilities subcommittee, Ann Sims, M.D., subcommittee chair**

- I. Presentation of working document to the committee. Suggestion made to approve document in portions, rather than a whole document to keep committee on track with the action plan, goal 2, objective 2.3.
- II. Medical Advisor section
  - a. (Golden) Suggestion to include "assist with health curriculum review to insure medical accuracy..."
  - b. School health services health care professional – who is defined as the healthcare professional since as it is interpreted from district to district.
  - c. This definition should match performance appraisals conducted appropriately for evaluation (conducted according to licensing requirements).
  - d. This document can always be approved in its entirety, with items available to change as more information is gathered or circumstances warrant change.
  - e. Items corrected in this meeting should also be included for approval as part of the document.
  - f. Motion to approve (Golden) medical advisor section as modified, motion seconded (Tustin).

# School Health Advisory Committee

April 11, 2002

Moreton Building, room 652

10:30 a.m. – 2:30 p.m.

---

- g. Chair puts to question approval of medical advisor section as modified, group reaches unanimous decision (none oppose), and section is approved.
- III. The only time the term coordinated school health is mentioned is under the Unlicensed Assisted Personnel.
  - a. Suggestion to place term coordinated school health programming in each job description.
  - b. Suggestion to place a preamble at the top of the document since this is just a beginning model for school districts.
  - c. Suggestion to use the same phrase as located "in matters that impact...comprehensive school health."
- IV. School Health services coordinator section
  - a. Suggestion to add a comment after "...all school health services."
  - b. Suggestion to add terms that indicate that this person identifies school health needs, and serves as an advocate, or someone who will represent those needs.
  - c. Suggestion to change "facilitators" to state "supports or participates"
  - d. Group agrees and approves of "participates"
  - e. Motion to accept (Tustin) modification of school health services coordinator, motion seconded (Harris).
  - f. Chair puts to question approval of school health services coordinator as amended, group reaches consensus.
- V. School Nurse (RN) section
  - a. Suggestion to omit "...contributes to the school newsletter," and replace with "communicates with parents and staff regarding individual students and general health issues of the student population."
  - b. Suggestions to include "participates on campus school health advisory councils (SHAC's)..."
  - c. Suggestion to move the minimum salary schedule for certain staff underneath the school nurse (RN) instead of current location under Licensed Vocation Nurse (LVN).
  - d. Two roles should look over the RN – the school health services coordinator and the medical advisor.
  - e. These recommendations fit in with the standards of the Nursing Practice.
  - f. Some of these sections are being developed for the first time, the subcommittee recognizes this fact and expects change or suggestions of the recommendations.
- VI. Licensed Vocation Nurse (LVN) section
  - a. Discussion about the boundaries and limitations of LVN practice and knowledge.
    - i. Definition of "complex," "stable & predictable" situations.
    - ii. Subcommittee desires to convey the message of when a situation is dynamically changing, people should know to get their supervisor.
  - b. Subcommittee is tasked with continuing to edit LVN section of this working document.
- VII. Unlicensed Assistive Personnel (UAP)
  - a. Concerns with the content in the UAP section,
  - b. Suggestion to include health extender in the definition/description of the UAP.
    - i. Suggestion not accepted since the "health-extender" term is only used in a school setting;
    - ii. RN's have also been asked to not use this word to describe the UAP.
  - c. Subcommittee moves to accept the definition/description of the UAP (Sims), motion seconded (Harris).
  - d. Chair puts to question approval of UAP section for this document, group reaches consensus – section approved.

## Comments/Questions

C1: Our school pretty much meets all the bullets and seems appropriate to what should be provided for student health services. (Shobe)

C2: Only section unapproved is the Licensed Vocational Nurse section.

## State Board of Education (SBOE) Rule regarding Senate Bill (SB) 19

- I. Controversy extends beyond the rule passed recently by the SBOE. Includes Senate Bill 19 (77<sup>th</sup> Texas Legislative session) in its entirety.

# School Health Advisory Committee

April 11, 2002

Moreton Building, room 652

10:30 a.m. – 2:30 p.m.

---

- II. First part of the bill was left up to the SBOE, which would require a rule pass. On March 22, school districts will be required to either have daily thirty minutes of physical education or to have 135 cumulative minutes of physical activity per week, beginning in September.
  - a. This rule applies to all students in grades kindergarten through sixth grade,
  - b. Does not apply to half day kindergarten classes,
  - c. Will not apply to 6<sup>th</sup> graders in a TEA recognized middle school.
- III. Letter from the Commissioner of Education will go out on Friday (April 12) that will contain an outline of what the rule is for school districts, it will also contain an example of a TEKS based structured activity, and the schools will have the ability to determine what would best suit there needs.
  - a. Schools will then be able given the opportunity to get creative in developing structured activities.
  - b. A Question & Answer document will follow ten days after the letter.
  - c. Request made by a committee member to get the letter that is being sent to school districts.
- IV. The last portion of SB19 contains language that mandates schools to implement a coordinated school health program such as Coordinated Approach To Children's Health (CATCH). The agency has decided (as shown in the third paragraph) giving school districts the ability to choose a program, approved by the agency. Since this legislation has passed, Dr. Fleming has had contact with 4 people trying to get qualified for approval.
  - a. School districts will be able to use programs already in place provided it meets agency approval.
  - b. CATCH is an approved program and school districts may choose to utilize this program.

## **Survey subcommittee, Michelle Smith, subcommittee chair**

- I. Introduction of TDH staff from the Research and Public Health Assessment (RPHA) Division, Joshua Vest to give a status report of the results of the 2001 fall district survey.
- II. Generalized data broken down by public health regions. (PHR)
  - a. PHR 9/10 had the strongest response rate,
  - b. Good data set is linked to the Public Education Information Management System (PEIMS) data maintained by the Texas Education Agency (TEA),
  - c. RPHA should also be able to derive good, solid conclusions from the entered data due to receiving such a large sample size.
- III. RPHA requests that if there are particular qualifiers that the committee is specifically interested in, send to the School Health Program and the program will collaborate with RPHA.

## **Comments/Questions:**

C<sup>1</sup> – (Harris) Before we sent the data electronically, we disaggregated the data and saw that 307 students were referred from my district alone.

C<sup>2</sup> - (Harris) We may also need to look for more resources regarding Acanthosis Nigricans (AN) in order to raise awareness, not anxiety.

## **Legislative subcommittee, Michael Hinojosa, subcommittee chair - Handout**

- I. Handout given to members listing issues committee members have determined to be of interest. List is divided into two categories, those with a fiscal note attached to it, and those without a fiscal note.
- II. Recently had a subcommittee meeting with TDH's Office of Governmental Relations (OGR), and with an epiphany of sorts regarding some of the things this committee wants to accomplish not having to go through legislation, but rather, respective agencies can write a rule.
- III. The New Commissioner of Health, Dr. Sanchez has expressed his interest in immunizations and obesity which are also some of this committee's interests.
- IV. Members of this committee must also be careful about our situation since we are an advisory committee only – we must be absolutely careful as to how we affiliate ourselves to the public.
- V. The Commissioner of Health and the Commissioner of Education are both new; the subcommittee felt that we might pursue a meeting and collaboration between the two commissioners.

# School Health Advisory Committee

April 11, 2002

Moreton Building, room 652

10:30 a.m. – 2:30 p.m.

---

- VI. Subcommittee would like to prioritize the list of initiatives that the committee has received in this meeting, but there is a need to know what type of influences each committee member may have.
  - a. Cards passed around, place your name, who you know and it will be compiled to a master list,
  - b. Also include organizations,
  - c. Stakeholders will use purple cards.
- VII. Dr. Page will have rules written by July for the federal education rules (No Child Left Behind or IDEA?)

## **“Replacing Registered Nurses with Health Extenders in a School Setting.” Study written by Sally Griewahn and Alice Murphy, presented by Sally Griewahn**

- I. Abilene ISD facing a budget shortfall due to decreasing enrollment and decreasing average daily attendance.
  - a. RN's were being replaced with “health extenders” in order to save money.
  - b. Ultimate goal was to have one RN in charge and the remainder LVN's or “health extenders” which conflicted with a previous goal set in 1989 of working toward staffing one RN per campus.
  - c. Public outcry due to replacement, forcing the medical and nursing community to join forces. The tri-county medical society commissioned an exploratory study (Nov 2000).
- II. Ms. Griewahn gave a brief overview of school health services in Texas, referring to various acts and legal citations
  - a. 1921 Shepard-Towner Act;
  - b. 1949 Gilmer-Aiken Act; &
  - c. 1991 Sunset of TEC 85.41.
- III. Findings of exploratory study:
  - a. Training required for “health extenders” is a GED and 8 hours of training.
  - b. LVN's have been hired as “health-extendors.”
  - c. Qualitative and Quantitative aspects to this study.
  - d. Challenges identified:
    - i. Highly charged atmosphere – political and emotional;
    - ii. Some staff reportedly afraid to participate in the study;
    - iii. District provided the random sample of employees to participate;
    - iv. 29% response rate.
  - e. Quality of care and understanding of the health-extender role were questioned
    - i. Is the health & safety of students in jeopardy?
    - ii. Are there violations of the Texas Nursing Practice Act?
    - iii. Is the RN coverage on each campus adequate?
  - f. Non-delegable duties defined, staffing patterns examined, health services personnel polled as to time necessary for each procedure/treatment.
  - g. Terminology of delegation
    - i. Administrative meaning – assign a task;
    - ii. Nursing meaning – delegates a task, but retains accountability.
  - h. RN's are held accountable for patient outcome even when someone else does a task.
  - i. School claiming income for MAC and SHARS
    - i. Where is the money going?
    - ii. Who is doing the claiming?

### Comments/Questions:

Q<sup>1</sup>: What is the Medical Society doing in regarding the findings?

A<sup>1</sup>: Tuesday (April 9), they met with reporters, and the local school health advisory council.

Q<sup>2</sup>: What medical society are you talking about?

A<sup>2</sup>: The Tri-County Medical Society (Taylor, Haskell, and Jones Counties)

Q<sup>3</sup>: When is this report going to be published and available to the public?

A<sup>3</sup>: As soon as possible.

C<sup>1</sup>: My concern is that this looks like a situation that has turned into an “us” vs. “them” instead of “we have a problem, how could we fix it.”

Q<sup>4</sup>: Who filled out the surveys?

A<sup>4</sup>: Parents, health extenders, RN's, Principals.

# School Health Advisory Committee

April 11, 2002

Moreton Building, room 652

10:30 a.m. – 2:30 p.m.

---

C<sup>2</sup>: A great addition to this study would be outcomes data, and it is real important for a study like this to be statistically sound.

Q<sup>5</sup>: Are there legal barriers for this district? (C. Douglass)

A<sup>5</sup>: Yes, they may be guilty of violating the medical and/or nursing practice acts.

## School Health Program update

### I. Texas Comprehensive School Health Network:


- a. Staffs a person (specialist) in each educational service center. Training for the aforementioned rules on physical activity would most likely come from the specialists.
- b. Motivation oftentimes has a shelf life – specialist contact school districts to find out the status of the S H A Councils.
- c. Network is having their second staff meeting next week (April 16-18). This staff meeting allows them to network between each other and develop a resource directory. They will also revisit their mission statement.

### II. Awards for Excellence in Texas School Health

- a. Results have been tabulated to produce the winners for this year's (2001-2002) cash awards. Fifteen school districts have been awarded cash prizes ranging from \$700 - \$1,500.
- b. Winners will be given their cash prizes at the ALLWELL conference held in June.
- c. There is a future possibility of teaming up with the Texas Medical Association since they also have a similar program that also promotes coordinated school health programming.

## Plus/Delta Activity

## Adjourn



Michelle Smith, Chair

School Health Advisory Committee

Approved for circulation June 13, 2002